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CT2709 US-NP



**CERTIFICATE OF MAILING**

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

James Epperson  
Type or print name

*James Epperson*  
Signature

July 20, 2006  
Date

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF  
**KENNETH BOY, ET AL.**  
APPLICATION NO: **10/731,854**  
FILED: **12/09/2003**  
FOR: **2-ARYL THIAZOLE DERIVATIVES AS KCNQ MODULATORS**

ART UNIT: **1625**  
EXAMINER: **MORRIS, PATRICIA L.**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Sir:

This Supplemental Information Disclosure Statement is being filed in accordance with 37 C.F.R. §1.97(c).

In accordance with 37 C.F.R. §1.56, applicant wishes to call the Examiner's attention to the references cited on the attached form(s) PTO-1449.

Copies of these references are enclosed herewith.

07/26/2006 RFEKADU1 00000001 193860 10731854  
01 FC:1806 180.00 DA



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Certificate under 37 C.F.R. §1.97(e)(1)

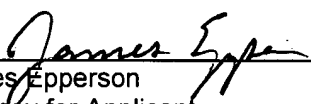
I, the undersigned attorney, hereby certify that each item of information contained in this Supplemental Information Disclosure Statement was first cited in any communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this Statement.

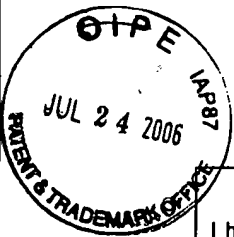
The Examiner is requested to consider the foregoing information in relation to this application and indicate that each reference was considered by returning a copy of the initialed PTO 1449 form(s) and charge the appropriate fee under §1.17 (p) to Deposit Account 19-3880 in the name of Bristol-Myers Squibb Company.

Respectfully submitted,

Bristol-Myers Squibb Company  
Patent Department  
P.O. Box 4000  
Princeton, NJ 08543-4000

Date: 7/20/2006

  
James Epperson  
Attorney for Applicant  
Reg. No. 52,867  
Phone: 203-677-6974



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I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

James Epperson  
Type or print name

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Signature

July 20, 2006  
Date

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF  
**KENNETH BOY, ET AL.**  
APPLICATION NO: **10/731854**  
FILED: **12/09/2003**  
FOR: **2-ARYL THIAZOLE DERIVATIVES AS KCNQ MODULATORS**

ART UNIT: **1625**  
EXAMINER: **MORRIS, PATRICIA L.**

Mail Stop Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**FEE LETTER FOR SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Sir:

Please charge Deposit Account No. 19-3880 in the name of Bristol-Myers Squibb Company in the amount of \$180 for payment of the fee pursuant to 37 CFR §1.17(p) for the submission of a Supplemental Information Disclosure Statement under 37 CFR §1.97(c).

An additional copy of this paper is here enclosed. The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Account No. 19-3880 in the name of Bristol-Myers Squibb Company.

Respectfully submitted,

Bristol-Myers Squibb Company  
Patent Department  
P.O. Box 4000  
Princeton, NJ 08543-4000

Date: 7/20/2006

*James Epperson*  
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Phone: 203-677-6974

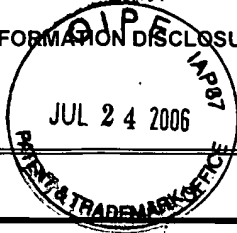
FORM PTO-1449  
(REV. 7-85)U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE**INFORMATION DISCLOSURE CITATION**

(Use several sheets if necessary)

SUPPLEMENTAL INFORMATION DISCLOSURE CITATION

ATTY. DOCKET NO.  
CT-2709 NP  
APPLICATION NO.  
10/731,854  
APPLICANT  
BOY ET AL.  
FILING DATE  
DECEMBER 9, 2003

Group

**U.S. PATENT DOCUMENTS**

EXAMINER INITIAL		DOCUMENT NUMBER	DATE	NAME	CLASS	SUBCLASS	FILING DATE
	AA						
	AB						
	AC						
	AD						
	AE						
	AF						
	AG						
	AH						
	AI						
	AJ						
	AK						
	AL						

**FOREIGN PATENT DOCUMENTS**

		DOCUMENT NUMBER	DATE	OFFICE	CLASS	SUBCLASS	TRANSLATION	
							YES	NO
	AM	Japanese Patent 128275	4/28/92	English Equivalent			<input checked="" type="checkbox"/>	<input type="checkbox"/>
	AN						<input type="checkbox"/>	<input type="checkbox"/>
	AO						<input type="checkbox"/>	<input type="checkbox"/>
	AP						<input type="checkbox"/>	<input type="checkbox"/>
	AQ						<input type="checkbox"/>	<input type="checkbox"/>

**OTHER DOCUMENTS** (Including Author, Title, Date, Pertinent pages, Etc.)

	AR	
	AS	
	AT	

**EXAMINER****DATE CONSIDERED**

\*EXAMINER: Initial of reference considered, whether or not citation is in conformance with MPEP 609: Draw a line through citation if not in conformance and not considered. Include a copy of this form with the next communication to applicant.